

A CASE OF COMPLETE ATHETOSIS WITH POST-MORTEM.¹

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IN the spring of 1890, J. B., female, aged twelve, was brought to my office for continuous pain in the stomach, and a spasmodic disorder of twelve years' duration.

Family history.—The father has symptoms of spinal-cord disease; the mother is healthy. She has one older brother healthy.

Personal antecedents.—The patient was born at seven months. Eighteen months after birth, the mother noticed that its arms and legs moved peculiarly. After a few months she observed that the movements ceased only in sleep.

She was never able to control her muscles sufficiently to be able to stand or to use her hands. After she was three years of age the head began to be drawn backward. The child has been able to understand speech ever since it was two years old, but has never been able to speak. She would make certain sounds intelligible to the parents but not to a stranger. She pronounced some few words.

Personal appearance of the patient.—The child was extremely emaciated. The face was distorted by spasms, and the head drawn backward. The arms were in slow, continuous irregular motion. The fingers had the characteristic athetoid movements.

The spine was arched, the convexity looking forward.

The lower extremities were in continuous motion; at times they were quiet, while in a rigid tonic spasm of the extensor groups.

Every voluntary muscle in the body was involved. The sphincters were under normal control.

Smelling, hearing, vision, and taste all normally developed. Cutaneous sensibility normal.

As it was a hopeless case it was determined to keep the little one free from suffering at all hazards. Accordingly

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chloranodyne was prescribed in sufficient doses to keep her free from pain. This was given her with increasing quantities of morphine until August, 1891. The movements had by that time increased to such an extent that there was gain in many of the muscles. The head was so retracted that the occiput rested between the shoulders.

The accompanying photographs taken at this time do not show accurately the extreme distortion. For the last two weeks of her life she was given chloroform almost continuously.

She died September 5th, aged thirteen years, six months, and twenty-five days.

Autopsy: September 6th by Dr. Rochester and myself.

Body extremely emaciated; weight about fifty pounds. The right arms were firmly fixed at the shoulder. The biceps were strongly contracted. The right thigh was crossed over the left. It had been in that position for several weeks. Ordinary force failed to straighten the leg.

Heart very small, otherwise normal lungs; pinkish and normal; liver normal; kidneys small, capsule adherent; suprarenal capsule large; intestines normal; stomach small; thickened pylorus, chronic catarrh; uterus very small; ovaries well developed.

The skull was sawn through. The bones were hard and of average thickness. The dura was thicker than usual, not adherent to the skull. The pia was much congested and very adherent to the cortex, it being impossible to peel it off without taking off the outer cortical layer with it. The brain was carefully removed and put in alcohol, where it was left until September 9th, when it was examined by Dr. Krauss and myself. We found the brain of normal size and symmetrical. On separating the two hemispheres no corpus callosum was to be seen, and the floor of the third ventricle was brought into view.

A closer examination showed that there was a narrow strip of white substance running along each side of the lateral ventricles. The strips were united at the anterior commissure by a narrow bridge of white substance.

Examination of the base of the brain.—On the left side the temporal lobe was retracted, and left the lenticular nucleus, which was very much softened, completely uncovered. The choroid plexus was pushed below it. The left crus was completely degenerated, and almost separated from the internal capsule. It was cheesy in appearance, and presented ragged uneven edges. It was firm to the touch, and more or less nodular.

In the apex of the left temporal lobe was an old abscess cavity of an estimated capacity of one ounce.

The right temporal lobe was not retracted. It contained a small and old abscess cavity of the capacity of one drachm.

The right crus was intact, but was constricted, and in places softened. The external surface over the abscesses was depressed.

This case is the fourteenth recorded case with autopsy. It is also the third case of complete athetosis with autopsy, a fourth case was reported by Prof. Osler at the last meeting of the association. Like most of the others the lenticular nucleus was involved and there were several spots of softening in it. The very remarkable separation of the corpus callosum can be accepted as a correct observation. It is just possible that the separation of the two hemispheres, which was done with great care, may have torn it—an accident which I have never seen occur. The probability that this was not torn is strengthened by the fact that the white substance on each side had clean, smooth edges.

The results of this autopsy tend to confirm the view that athetosis is a pathological entity.

GENIUS, A DEGENERATIVE EPILEPTOID PSYCHOSIS.

A wild paper with this title appears in *Alienist and Neurologist*, July, 1891, "done into English" by James G. Kiernan, M.D., from the Italian of Cæsar Lombroso. The suspicion that genius has a degenerative origin the author thinks grows more and more into proof. A nearer inspection of the phenomena that genius exhibits brings to light vagaries and methods not common to ordinary men. The eccentricities of Rousseau, Lenau, Tasso, Swift, Poe, Hoffman, etc., are cited to corroborate Lombroso's theory, which really, when boiled down, means nothing more nor less than the co-existence of remarkable second-class genius and insanity. These men attained literary excellence, not because they were mentally unsound, but in spite of that fact. As Dr. Kiernan says: "Genius is not a product of morbid mind. In the exceptional case where the two (genius and insanity) co-exist, genius is evidence of a healthy, conservative element, struggling with the incubus of disease." L. F. B.